

Commonwealth of Massachusetts
Executive Office of Health and Human Services

Department of Youth Services



2005 Annual Report

Deval L. Patrick, Governor
JudyAnn Bigby, M.D., Secretary
Jane E. Tewksbury, Esq., Commissioner

March 2007



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Department of Youth Services

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March, 2007



Dear Friends,

It is with great pleasure that I present the Department of Youth Services' 2005 Annual Report, which identifies our many accomplishments during 2005.

As the juvenile justice agency of the Commonwealth, it is our mission to protect the public and prevent crime by promoting positive change in the lives of youth committed to our custody. We accomplish this mission by partnering with communities, families, government, and provider agencies and through interventions that build knowledge, develop skills and change the behavior of the youth in our care.

As you know, I had the honor and privilege in April, 2005, of being named as the first female Commissioner of the Department of Youth Services. As Commissioner, my challenge has been to capitalize on the good work of state and provider staff in order to restore the Department to its previous position as the national model juvenile justice system in the country. During my first year as Commissioner, we made significant progress towards this goal.

In 2005, we restored the DYS Central Office to its critical administrative, policy, and reform role, reconnecting each of the existing four Regional offices and reopening a fifth Northeast Regional Office for Essex and Middlesex Counties in 2006. We reallocated capital funding to begin to address the serious health and safety concerns at many of the Department's antiquated facilities and secured approval for design, study, and build contracts for three infrastructure needs: the Connolly building in Roslindale; the Howland building in Taunton and the Tinkham Road building in Springfield. We expect to sign a fourth contract for the Middleton Colony Building in Middleton. In 2007, we will develop a Master Facilities plan, which will identify the useful age of all state-owned DYS buildings and establish a capital budget plan for renovating or replacing those facilities.

Other accomplishments in 2005 which are outlined in the following report include:

- **The Safety First Initiative:** In an effort to address the growing number of detained and committed youths with serious mental health issues, DYS implemented the Safety First Initiative, which allowed the agency to establish a critical network of clinical resources for DYS clients.
- **Boston Juvenile Reentry Initiative (BJRI):** DYS, in partnership with the Boston Police Department, was awarded federal funding to develop a model reentry program in the City of Boston to improve the successful reintegration of high risk offenders ages 14-21 back into the community following their stay in secure treatment. Focused on education and skill building, family support and unification, and successful community reentry, caseworkers work with the youth in the program prior to and after release. With the youth in the BJRI program demonstrating recidivism rates lower than that of the

general population, the Department sought and received state funding in its FY'07 budget to continue this program beyond the end of the federal funding period in September, 2006.

- **The Female Services Initiative:** In 2005, DYS received funding from the Massachusetts Legislature to enhance services to its female population. The Female Services Initiative funds enabled DYS to establish residential stabilization services for DYS female clients with serious mental health needs; to open an independent living program for young women who successfully graduate from DYS residential programs, but who lack appropriate settings in the community to which they can return; and to enhance clinical services in female programs including hiring licensed clinical directors and clinicians. Finally, as part of the Female Services Initiative, DYS hired a Female Services Coordinator to oversee all areas of operations in the continuum of care for female clients.
- **Detention Reform Initiative:** DYS was awarded federal funding to begin a three-year, multi-phase planning and implementation process to reduce overuse of detention in the Massachusetts juvenile justice system and develop a continuum of detention alternatives. The long-term goal of the detention reform initiative is to reduce the number of youth held in DYS detention facilities, who can be better served at home or in the community and for whom there is little likelihood that the outcome of their juvenile court cases will be a commitment to DYS.

I believe that as any agency, we have the vision, the commitment and the staff to move DYS forward as the leader of a major reform of the juvenile justice system in Massachusetts by decreasing an over reliance on locked secure detention, by investing in evidence-based best practices for the treatment of youth in the custody of the Department and by reconnecting youth to their families and communities within a network of community-based services and supports to prevent re-offending upon reentry.

I am extremely proud of our accomplishments and I look forward to working with all of you to provide better outcomes for the young men and women in our care.

Sincerely,

A handwritten signature in blue ink, reading "Jane E. Tewksbury". The signature is fluid and cursive, with the first name "Jane" and last name "Tewksbury" clearly legible.

Jane E. Tewksbury
Commissioner

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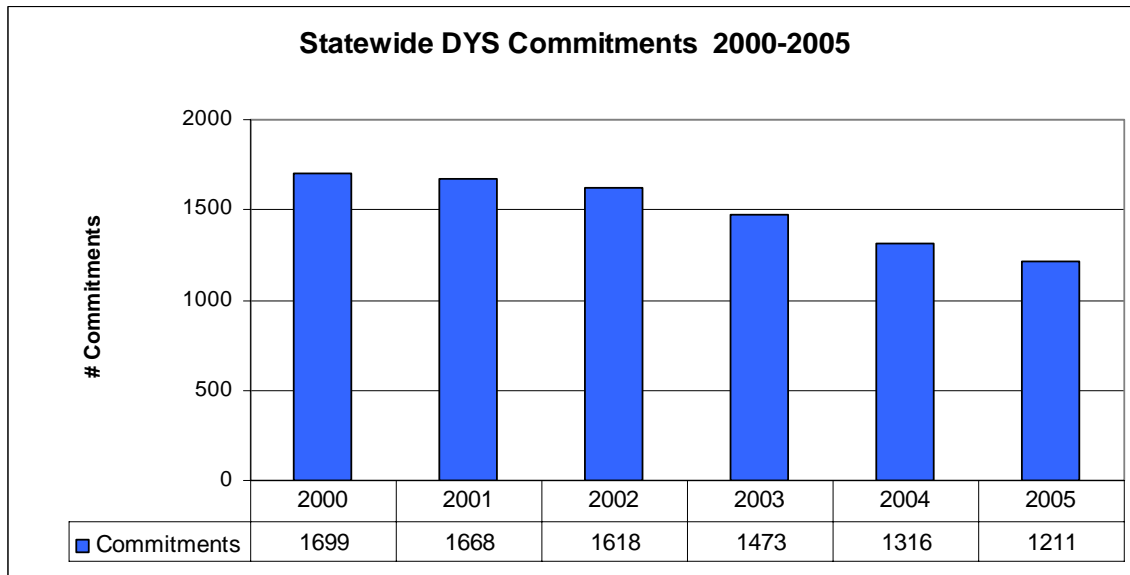
Mission of the Department of Youth Services

In August of 1969, with the passage of Chapter 838, the Massachusetts Legislature created the Department of Youth Services (DYS). DYS is the juvenile justice agency of the Commonwealth of Massachusetts and the nation's first juvenile correctional system, established in 1846. The mission of the agency is to protect the public and prevent crime by promoting positive change in the lives of youth committed to DYS custody, and by partnering with communities, families, and government and provider agencies toward this end. The staff at DYS accomplishes this mission through interventions that build knowledge, develop skills and change the behavior of youth in its care.

PROFILE OF THE 2005 DYS CASELOAD

As of January 1, 2006, there were 2,341 committed youth being served by DYS. Two thousand seventy-eight (2,078) of these youth were adjudicated delinquent and were committed to DYS until their 18th birthday. The remaining 263 youth were adjudicated delinquent and were committed as youthful offenders until their 21st birthday. Finally, on any given day, approximately 300 youth are being held on bail by the court at DYS detention facilities.

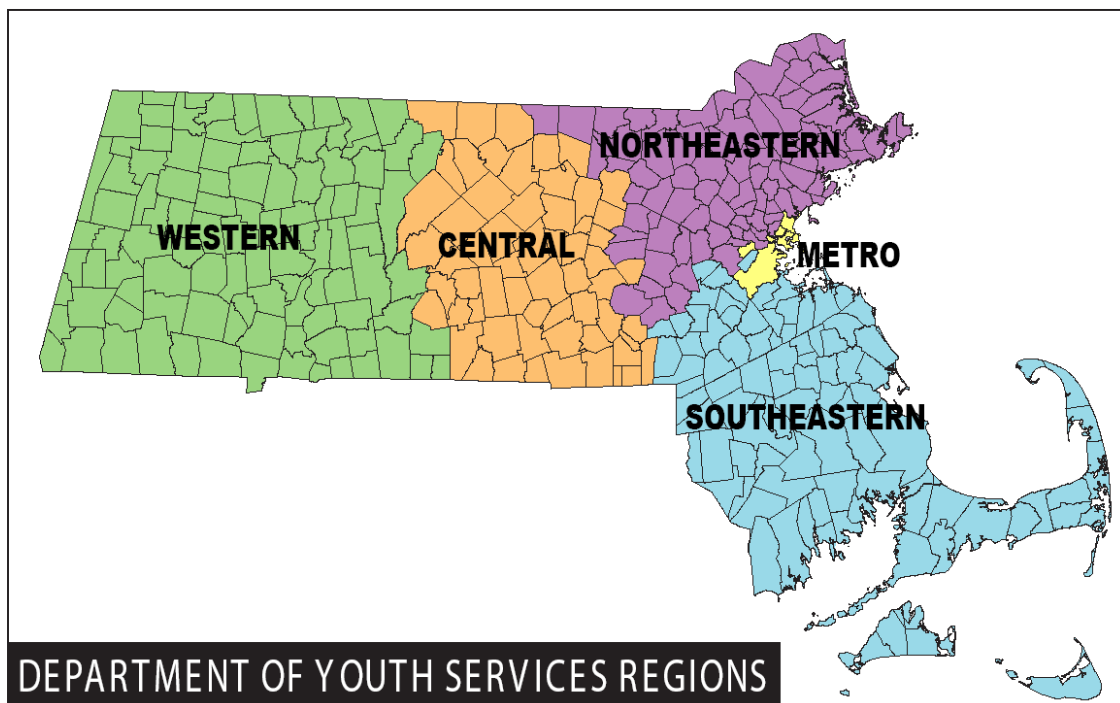
2005 DYS Commitments



- In 2005, 1,211 youths were committed to DYS (approximately 8% of the total number of juveniles arraigned in juvenile court on criminal charges).
- 1,157 of these youth were adjudicated delinquent and were committed to DYS until age 18.
- 54 of these youth were adjudicated delinquent and were committed as youthful offenders until their 21st birthday.

- The number of youth on the DYS committed caseload decreased 9.8% from 2004 (2570) to 2005 (2341),
- From 1995 to 2005, the male committed population has decreased from 2197 (1995) to 2018 (2005) representing an 8% decrease, while the female committed population grew from 205 (1995) to 417 (2005), representing a 103% increase.
- The number of pre-trial detention admissions in 2005 (4988) decreased by 4% from 2004 (5190); however, the 4988 detention admissions level in 2005 was 21% higher than the 4,119 detention admissions in 1995.

REGIONAL OPERATIONS



The overall goal of DYS is to develop a complete continuum of services from locked secure facilities to community supervision for committed and detained youth in five designated regions: Metro, Northeast, Central, Southeast, and Western. In 2006, the Northeast region, which had been closed in 1997 due to budget cuts, was restored to better serve Essex and Middlesex County youth. The DYS continuum of services includes hardware secure and staff secure residential care, and community supervision and support services for the successful reintegration of juvenile offenders to their families and communities.

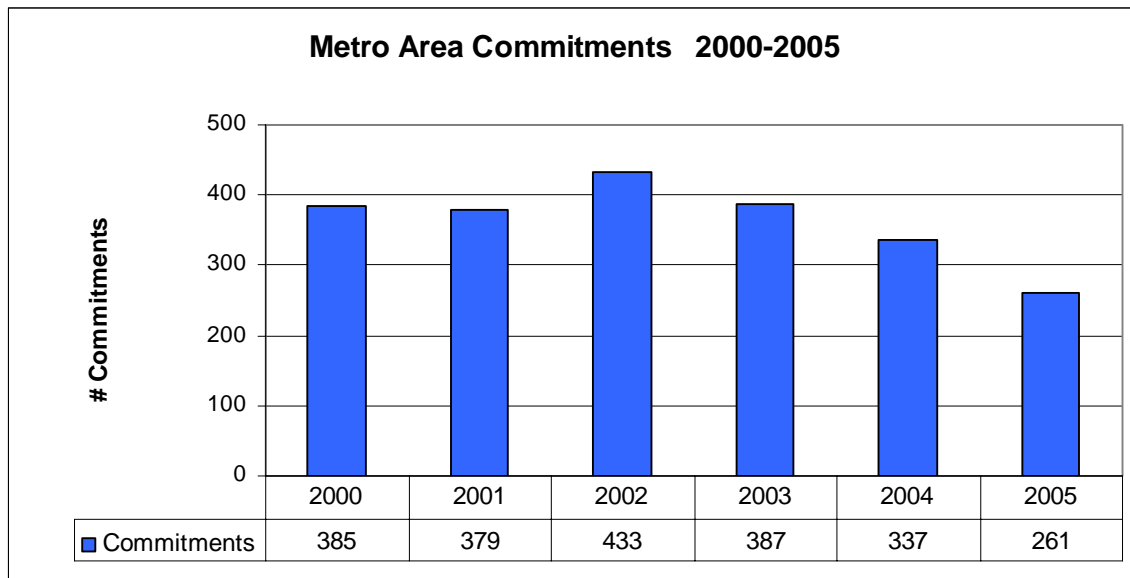
To meet the aforementioned goal, the Department has undertaken the following efforts:

- Establishing and operating thirty-six (36) community reentry centers in communities with the highest populations of DYS youth;

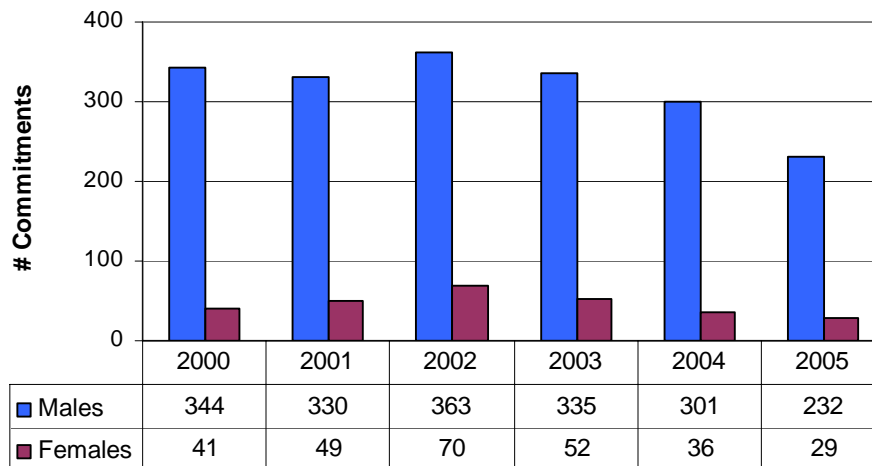
- Strengthening and expanding community partnerships by designing strategies to reduce crime and enhance community safety through such programs as the Boston Juvenile Reentry Initiative (BJRI);
- Enhancing our ability to assess youth risk and need to support individualized service delivery plans;
- Developing consistent treatment tracks to guide client movement; and
- Developing and implementing education, job training and employment programming for youth to reduce recidivism.

REGIONAL HIGHLIGHTS

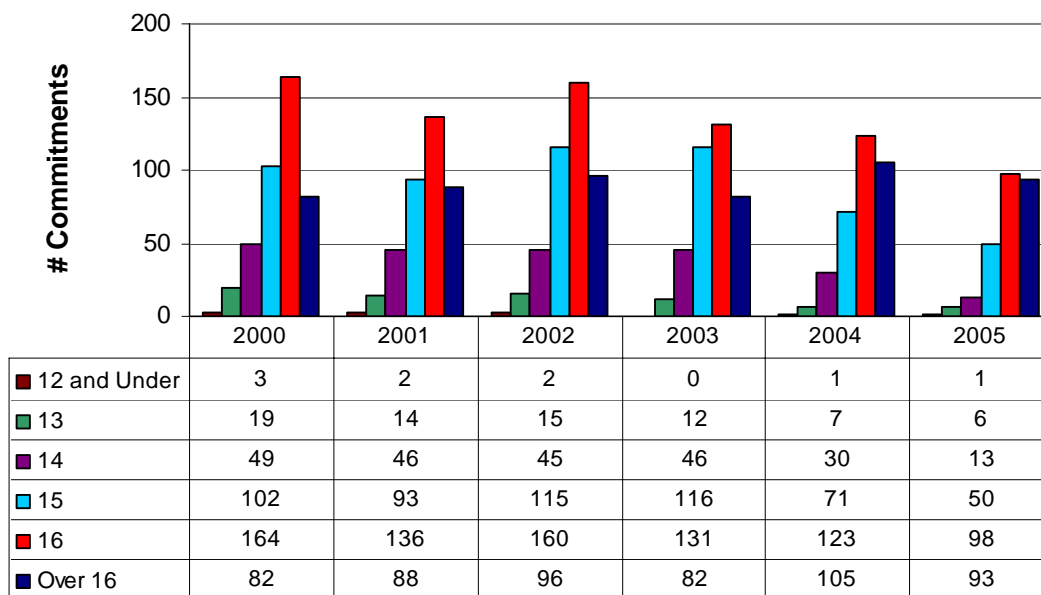
The **Metro Region** based in Boston, covers all of Suffolk County. In 2005, 261 youth were committed to DYS from the Metro Region. These youth were predominately male youth of color, age 16 and over, who committed offenses against the person.



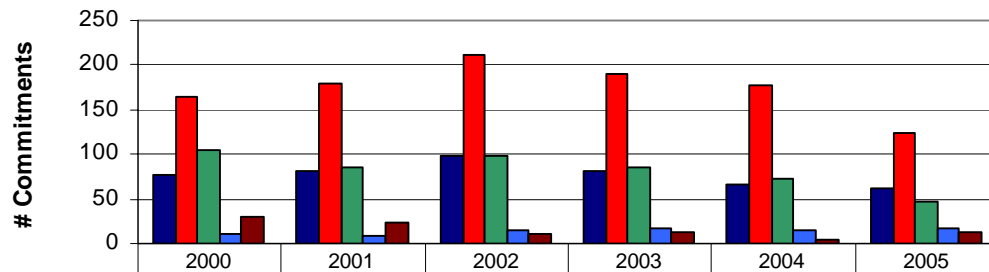
Metro Area Commitments By Gender 2000-2005



Metro Area Commitments By Age 2000-2005

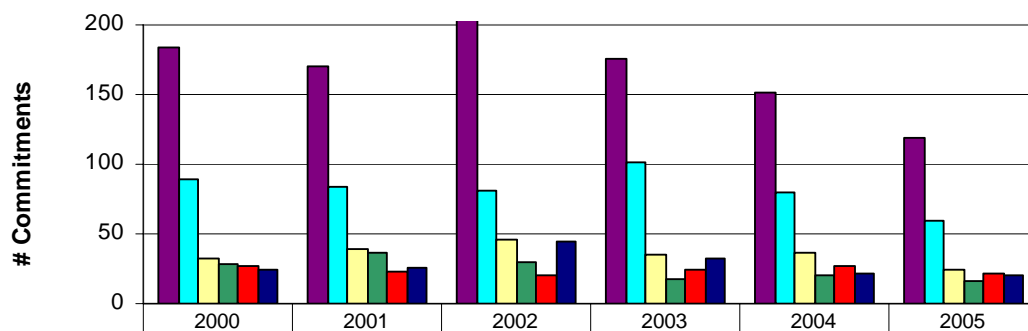


Metro Area Commitments by Ethnicity 2000-2005



| | | | | | | |
|-----------------|-----|-----|-----|-----|-----|-----|
| ■ Caucasian | 77 | 82 | 98 | 81 | 67 | 61 |
| ■ Afr. American | 164 | 179 | 212 | 191 | 177 | 123 |
| ■ Hispanic | 104 | 86 | 98 | 85 | 73 | 47 |
| ■ Asian | 11 | 9 | 15 | 18 | 15 | 18 |
| ■ Other | 29 | 23 | 10 | 12 | 5 | 12 |

Metro Area Commitments by Offense Type 2000-2005



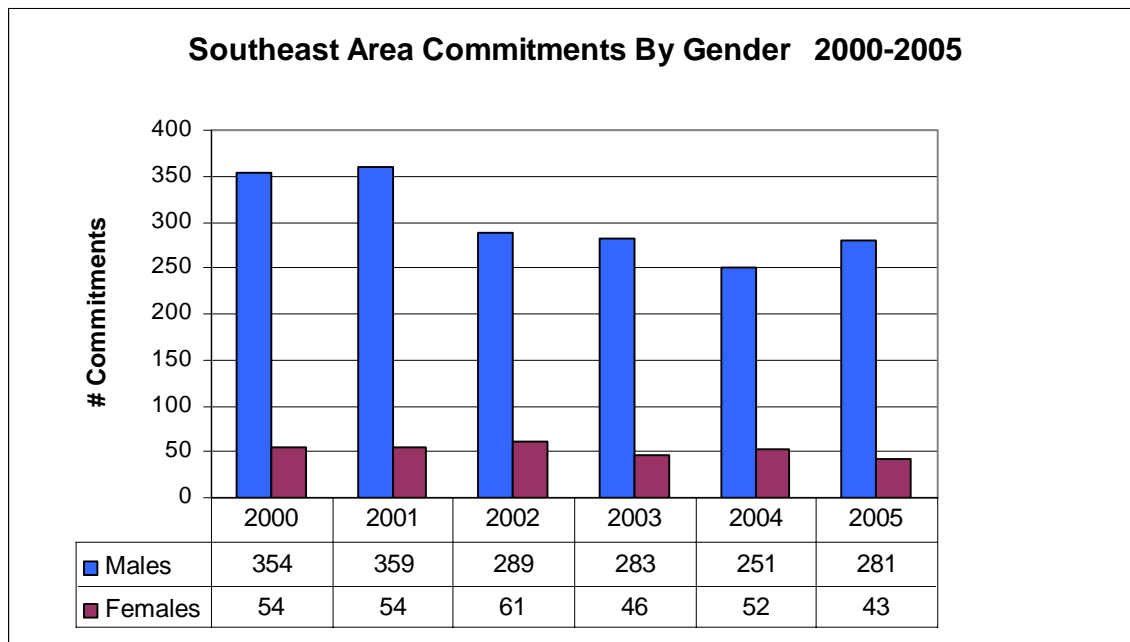
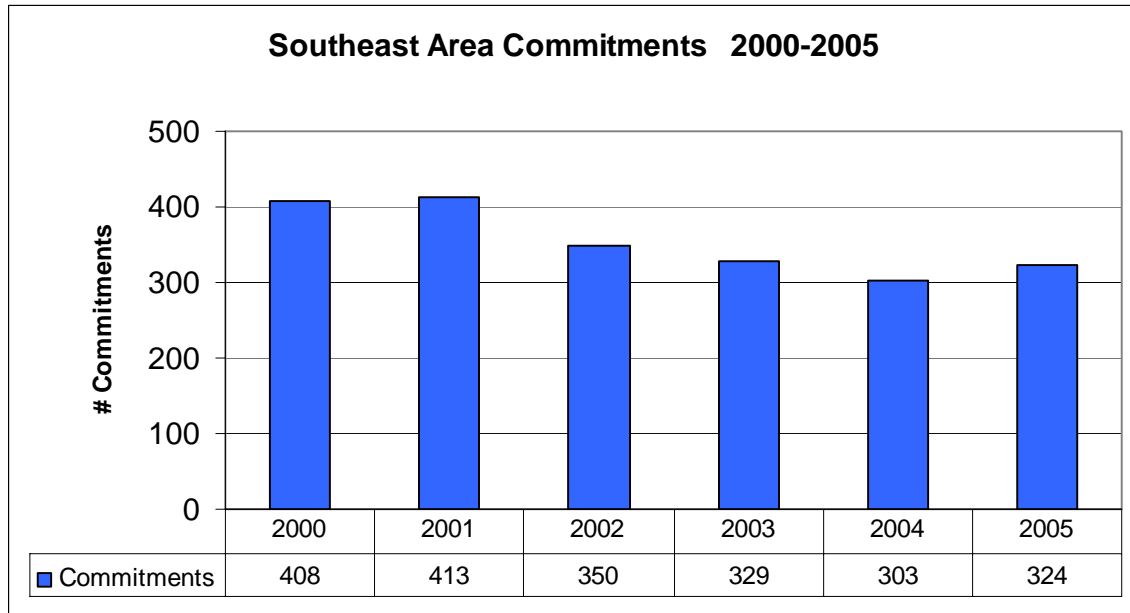
| | | | | | | |
|-----------------|-----|-----|-----|-----|-----|-----|
| ■ Person | 184 | 170 | 212 | 176 | 152 | 119 |
| ■ Property | 89 | 84 | 81 | 101 | 80 | 60 |
| ■ Drugs | 33 | 39 | 46 | 35 | 37 | 24 |
| ■ Motor Vehicle | 28 | 37 | 30 | 17 | 20 | 16 |
| ■ Weapons | 27 | 23 | 20 | 25 | 27 | 21 |
| ■ Public Order | 24 | 26 | 44 | 33 | 21 | 20 |

Metro regional initiatives in 2005 included:

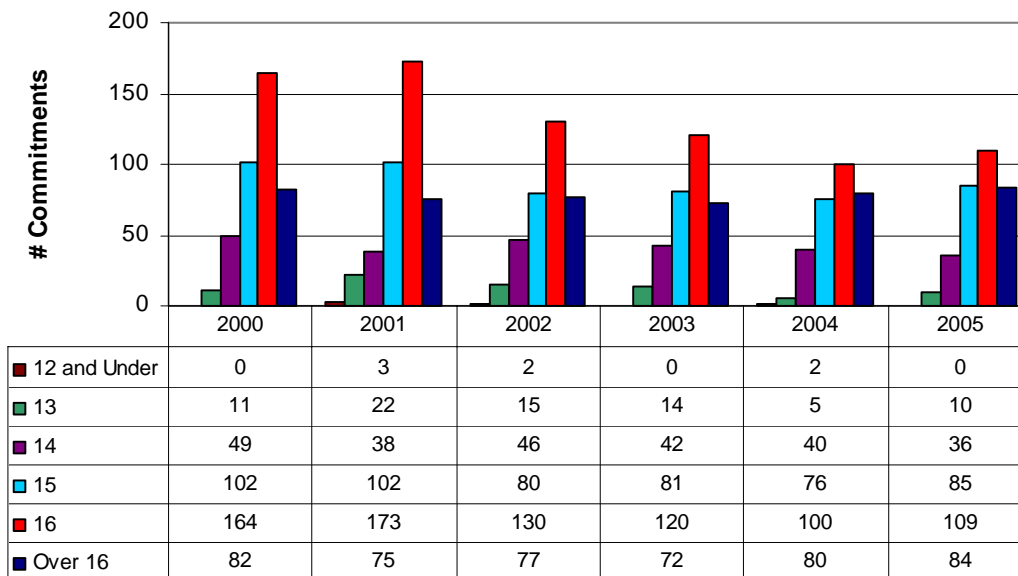
- **Boston Juvenile Reentry Initiative (BJRI – See Special Initiatives):** DYS was awarded federal funding in 2002 to develop a model reentry program in the City of Boston to improve the successful integration of the most serious and violent juvenile offenders back into the community following their stay in secure treatment.

- **Still We Rise** is the Metro Region's female community re-entry center. In 2005, DYS contracted with Roxbury Youth Works, Inc. and in partnership with faith-based organizations and community agencies, established a community reentry center and case management plan that would provide comprehensive gender-specific services for all girls returning to the community in the Metro region with the ultimate goal of reducing recidivism, Grant of Conditional liberty violations, and Absences Without Leave (AWOLs).
- **Hull Lifesaving Museum's Maritime Apprenticeship Program (MAP)** is a career exploration program offering intensive year-round training for young men and women in the custody of DYS. MAP creates viable entry-level employment opportunities for those individuals entering the Marine Trades industry in Boston. MAP serves high risk youths ages 16-22 with a focus on 18-20 year olds. In 2005, 15-20 DYS youth participated in the MAP summer program and approximately 7 youth continued in the year-round program, which offers intensified training, education, and internships for youth preparing for full-time careers in the maritime trades.
- **Performance-based Standards (PbS) Program (See Special Initiatives)** is a system for juvenile correctional agencies and facilities to identify, monitor and improve conditions of confinement. The PbS system asks facilities to collect certain data from records, reports, and interviews and enter it online through the PbS web site. Ultimately, the facility's performance is tracked over time. Metro Assessment Unit and Metro Pre-trial Detention Unit, two programs in the Metro region, are PbS sites.

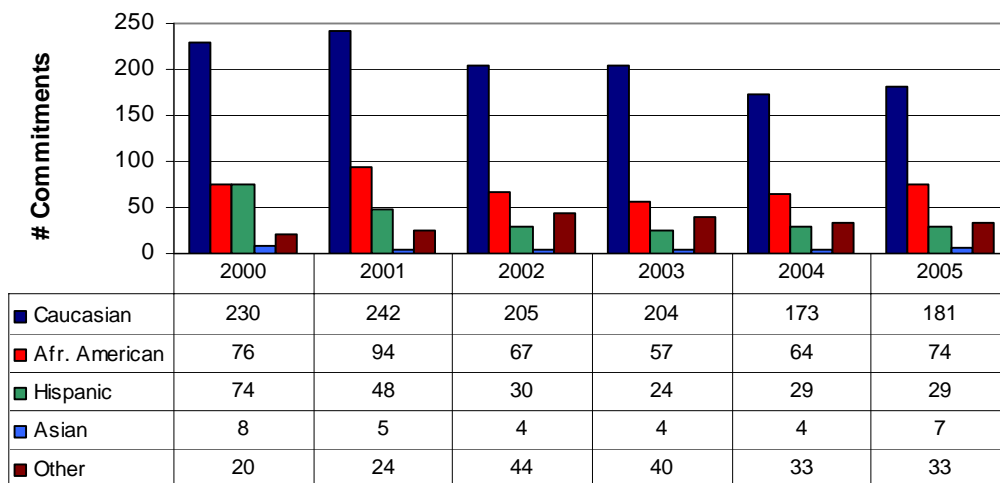
The **Southeast Region** based in Taunton, covers Barnstable, Bristol, Dukes, Nantucket, Norfolk (except the town of Bellingham), and Plymouth counties. In 2005, 324 youth were committed to DYS from the Southeast Region. The majority of these youth were white males, age 16 and over that committed person or property offenses.

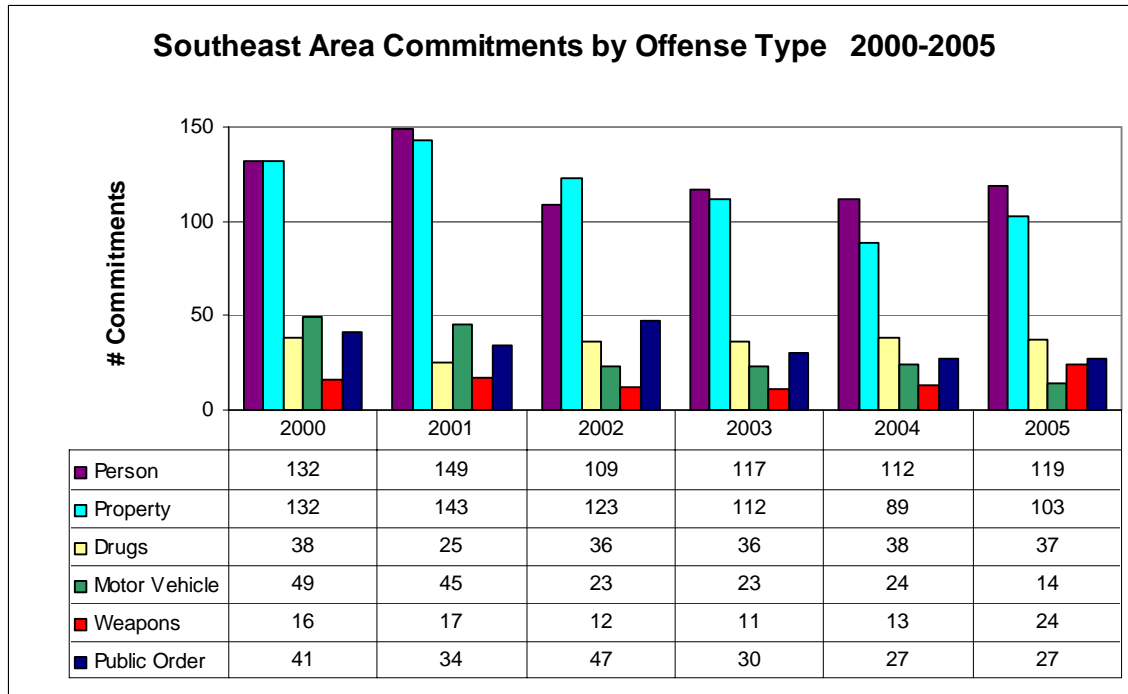


Southeast Area Commitments By Age 2000-2005



Southeast Area Commitments by Ethnicity 2000-2005





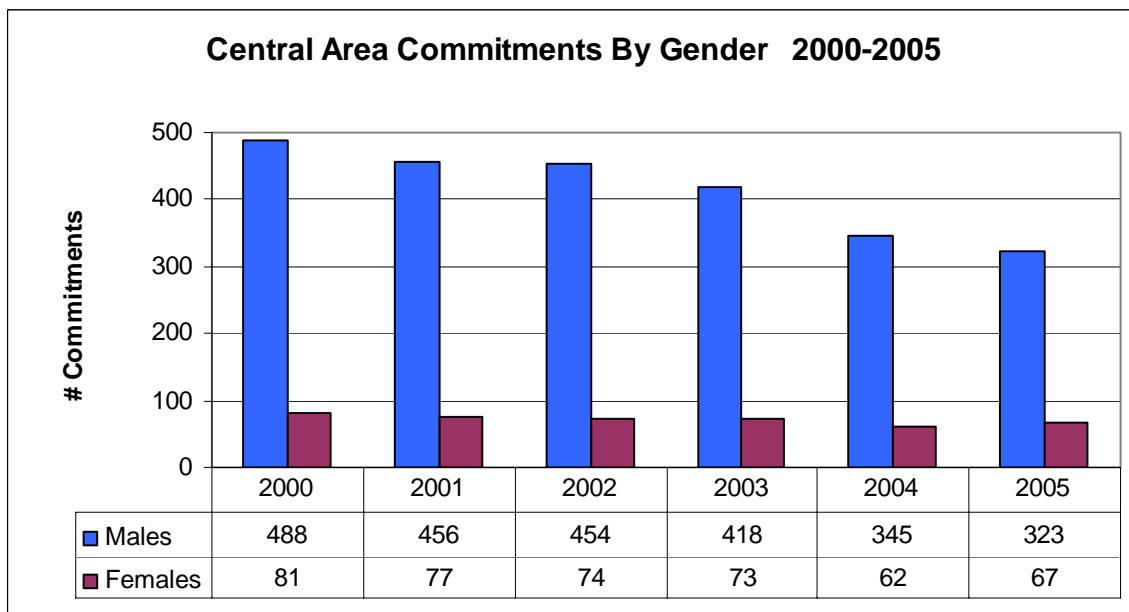
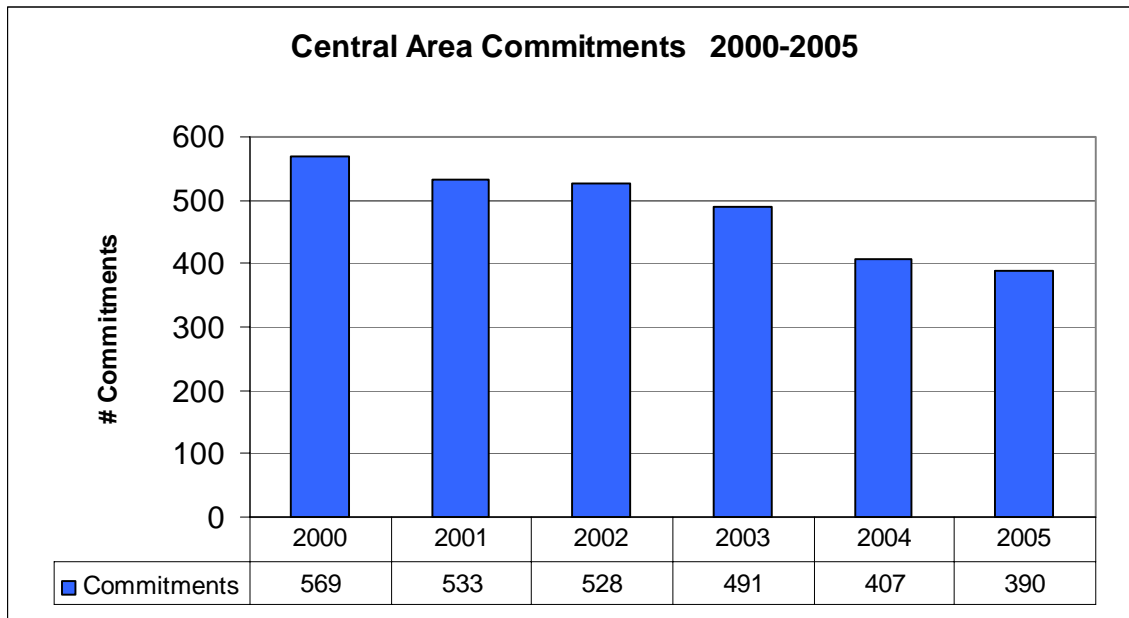
Southeast regional initiatives in 2005 included:

- Power Source:** Robin and Bethany Casarjian, the creators of Power Source, a prevention and rehabilitation curriculum written specifically for juvenile offenders and other high-risk youth, implemented their group curriculum at the Goss Secure Treatment facility and at Plymouth State Correctional Facility in the Southeast region. Power Source teaches youth basic emotional literacy skills, helps youth to manage and heal anger, grief, shame and rage, emotions that often result in high-risk behavior, and also helps youth to develop a healthier sense of self. Three 11-session groups were conducted at Goss and one 11-session group was conducted at Plymouth, and both staff and residents provided positive feedback about the curriculum.
- Dialectical Behavior Therapy (DBT):** The four programs operated by the Old Colony YMCA (OCY), under contract to DYS, have provided DBT training to their staff and used this form of cognitive-behavioral therapy with DYS clients. The OCY has been able to demonstrate the efficacy of DBT in detention, assessment and treatment settings, leading to the implementation of DBT agency wide.
- QUINCY CRC forms partnership with Hull Teen Clinic:** The Quincy CRC formed new partnerships with the Hull and the Brockton Area Multi-Service Center to provide group counseling focusing on sex education, and information about HIV prevention, counseling and testing. The Brockton Area Multi-Service Center conducted a series of informational groups with female clients including

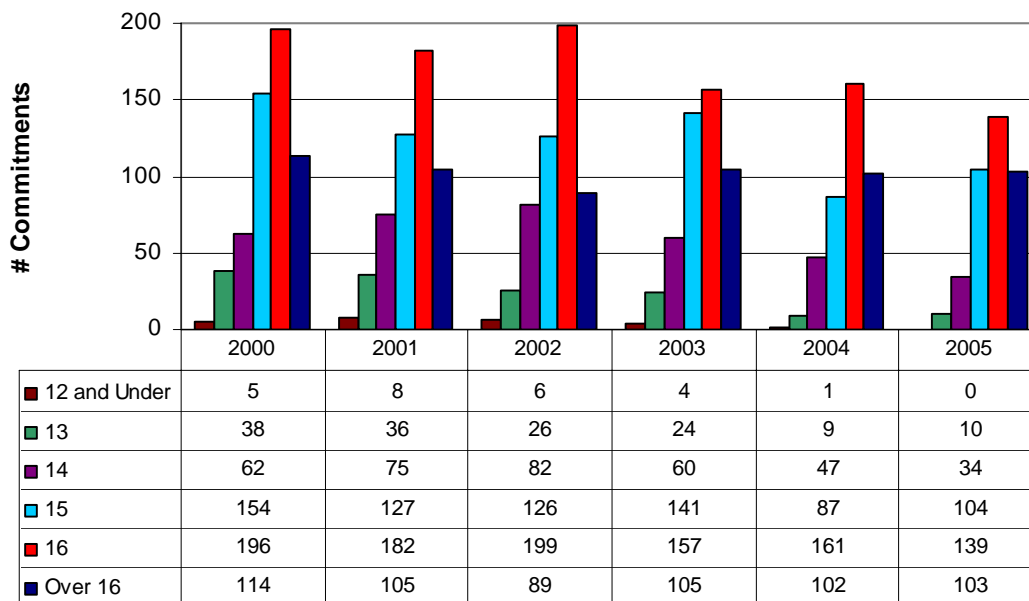
groups focusing on anger management, substance abuse, healthy relationships, life skills, and teen dating violence.

- **BROCKTON CRC continues to represent DYS on the Brockton Blueprint's Coalition:** The Blueprints Coalition is a local youth-serving collaboration created to develop a youth-wellness strategy for the youth of Brockton. It includes representatives from the Brockton School, Brockton Police, Brockton Area Private Industry Council, Plymouth County District Attorney's Office, DYS, Brockton Mayor's Office and the State Executive Office of Health and Human Services (EOHHS).
- **YouthBuild Transition Program:** YouthBuild Brockton is a full-time construction skills training program for young men ages 16-24 who have not completed high school. Youth spend half of their time learning construction skills by repairing and constructing new housing for low-income and homeless families while they spend the remaining time focusing on GED preparation, academic subjects and life-skills training. DYS has formed a partnership with the Old Colony YMCA YouthBuild Program to provide DYS clients in the Brockton Secure Treatment Unit (BSTU) with an opportunity to transition to the YouthBuild program. Eligible DYS clients go through screening, educational testing, and the application process while still in residence at BSTU. Clients accepted to the program have a detailed transition plan that prepares them for YouthBuild involvement upon release. Youthbuild programs across the country are funded by the U.S Department of Housing and Urban Development (HUD). Research has shown that eighty-five percent of students who complete the Youthbuild program either secure a job or go on to post-secondary education.

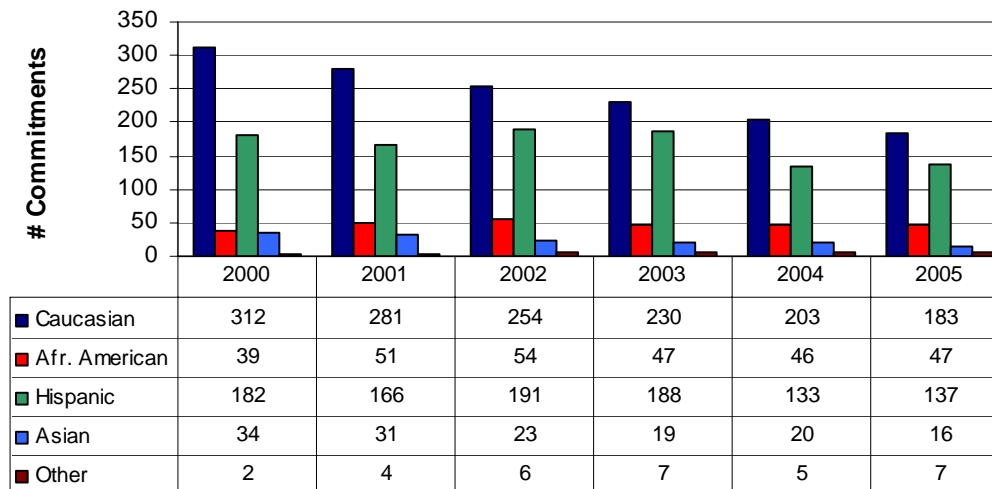
In 2005, the **Central Region** based in Westboro, covered Middlesex, Essex and Worcester counties (excluding the town of Athol and including the town of Bellingham). [In 2006, the Northeast Region, which had been closed in 1997 due to budget cuts, was fully restored to serve Essex and Middlesex County youth.] In 2005, 390 youth were committed to DYS from the Central Region. A large proportion of the committed youth were white males over the age of 15 who had committed offenses against persons or property.

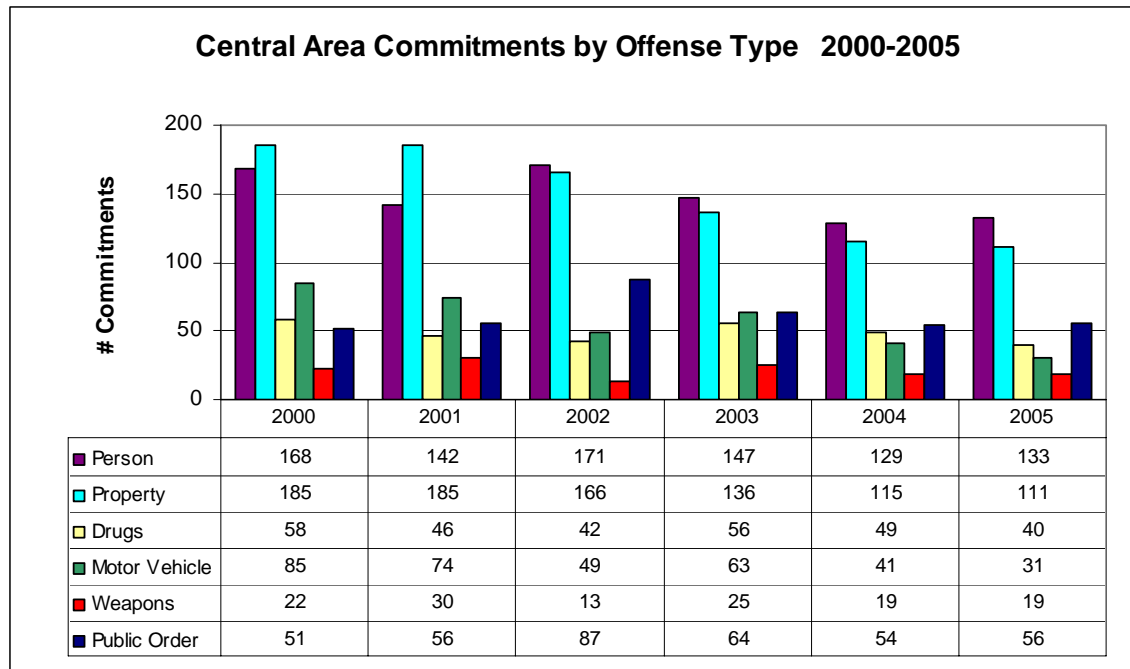


Central Area Commitments By Age 2000-2005



Central Area Commitments by Ethnicity 2000-2005



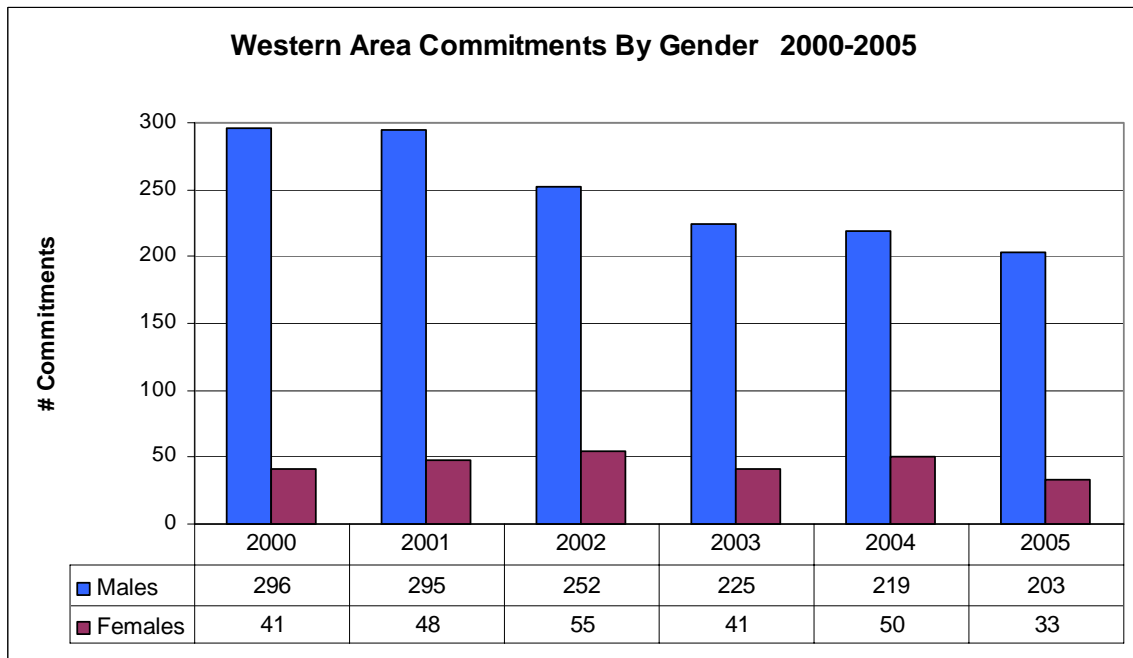
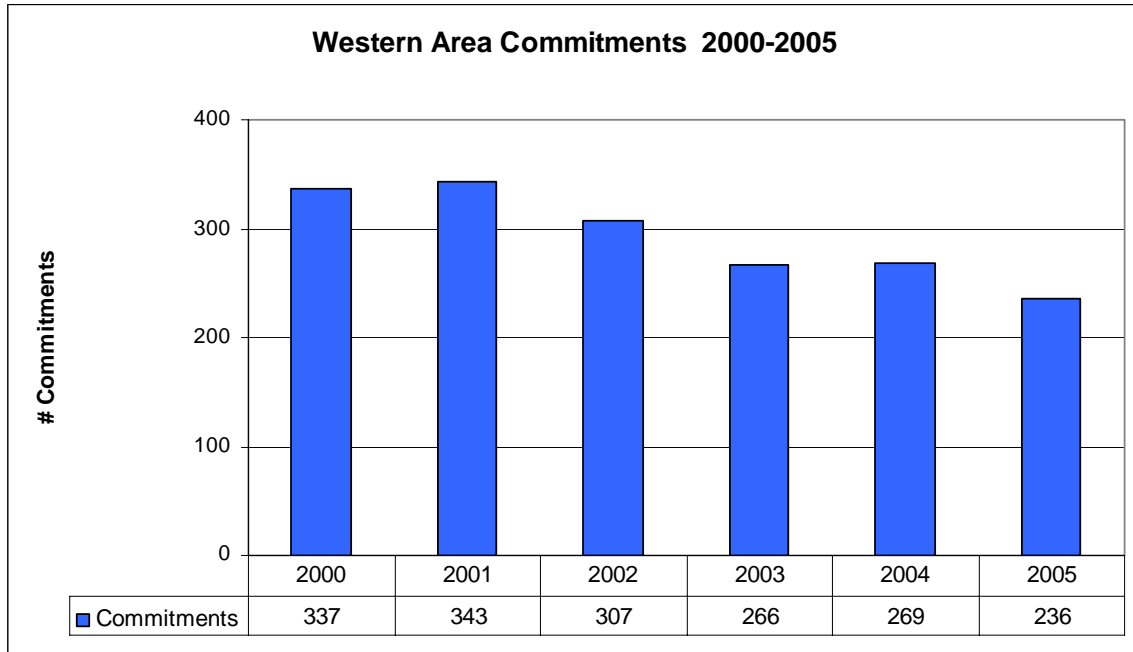


Central regional initiatives in 2005 included:

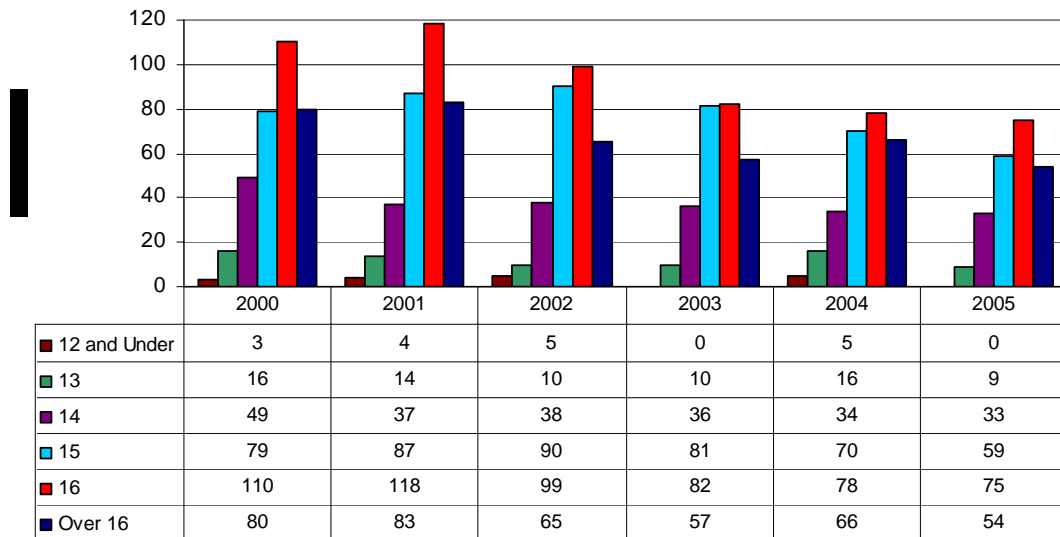
- New Girls Program:** On November 18, 2005, DYS held a ground-breaking ceremony for a new state-of-the art, gender-specific facility, located on the grounds of the Westboro State Hospital campus. The program's design represented a collaborative effort between DYS, DCAM and the architectural firm of Symmes, Maini, and McKee Associates. It is expected to open in the spring of 2007.
- New Girls Independent Living Program:** Eliot Community Human Services opened an 8-bed independent living program for girls in Framingham, MA. at the beginning of FY'05. The new program filled a need in the continuum of care for DYS female clients.
- Success through Reading:** Six programs in the Central Region participated in a summer reading program focused on character-education literature. The program featured guest readers from the community who visited the programs for a read-aloud session and highlighted the personal benefits of reading. DYS Commissioner Jane Tewksbury, State Representative Karyn Polito, and Wendy Nix from Channel 7 were just a few of the guest readers.
- National Guard Mentoring Program:** For the third year, the Pelletier Center was chosen to participate in the Massachusetts Army National Guard Drug Demand Reduction Program. The goal of the program is to reduce the demand for drugs among Pelletier residents through drug abuse education, prevention, and awareness.

- **Worcester Secure Treatment program residents provide community service at a Center for the Elderly:** Pass-eligible residents make weekly trips to the Age Center in Worcester to assist the elderly by cleaning up the grounds, helping staff with holiday projects, and being supportive to the elderly clients. This community service project provides Worcester Secure Treatment Program residents with an empathy lesson and allows residents who are close to discharge from the program to have social experiences outside the facility.
- **DYS Residents Speak at Colleges:** Throughout the year, DYS residents that are pass-eligible and display exemplary behavior in their program are asked to be guest speakers in graduate-level classes at local area colleges and universities. The residents are accompanied by program staff to a local college to speak about the challenges and difficulties they have encountered in the past and how treatment has impacted their life as they prepare to transition to a community setting. Typically, the resident will make a short presentation and then answer questions from the college students.
- **DYS Clients Reap Rewards of Eliot Center's Educational Program:** Since its introduction in 2004, the Eliot Center has offered older DYS students a safe and nurturing environment to earn their General Equivalency Degrees (GED). The program announced in 2005 that seven young men and women obtained their GED and three other youth registered to take the exam in 2006. Students attributed the small class size and dedicated teaching staff as the major factors in helping them to achieve their educational goals.
- **Metro-West Community Reentry Center (MWCO):** The MWCO and Chrysalis House (DYS Girls' residential program), in conjunction with the Southern Middlesex Opportunity Council (SMOC) partnered to provide entry-level computer and pre-employment "soft skill" development for both MWCO youth and Chrysalis House residents. The six-week, six-cycle program provided by SMOC introduced students to Microsoft Word, Excel, PowerPoint, and Publisher. The "soft skill" segments explored career interests, job applications, interviewing, business etiquette, and conflict resolution. Each student finished the program with a product: their own resume.
- **Metro-West Community Reentry Center "Continuum of Care Project":** The MWCO's "Continuum of Care Project" in conjunction with the Family Continuity Program of Framingham provided MWCO clients with individual and family counseling, as well as substance abuse and victim empathy groups. Groups were conducted on a weekly open-enrollment basis in Framingham, Marlboro and Milford. Direct referrals for individual and family counseling served as a strong foundation for a seamless and strength-based re-entry plan for MWCO clients.

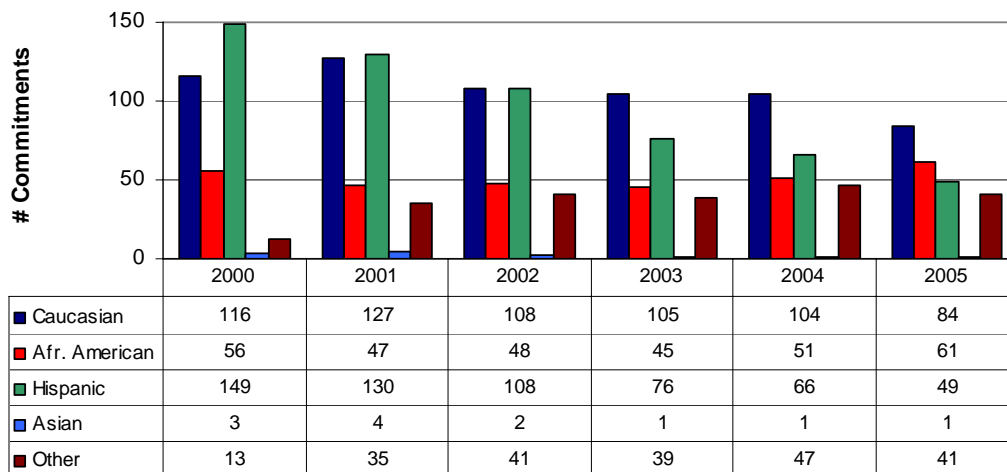
The **Western Region**, based in Springfield, covers Berkshire, Hampden, Franklin and Hampshire counties and the town of Athol. In 2005, 236 youth were committed to DYS from the Western Region. The majority of these youth were males of color over the age of 15 who were committed to DYS for property, person or drug offenses.

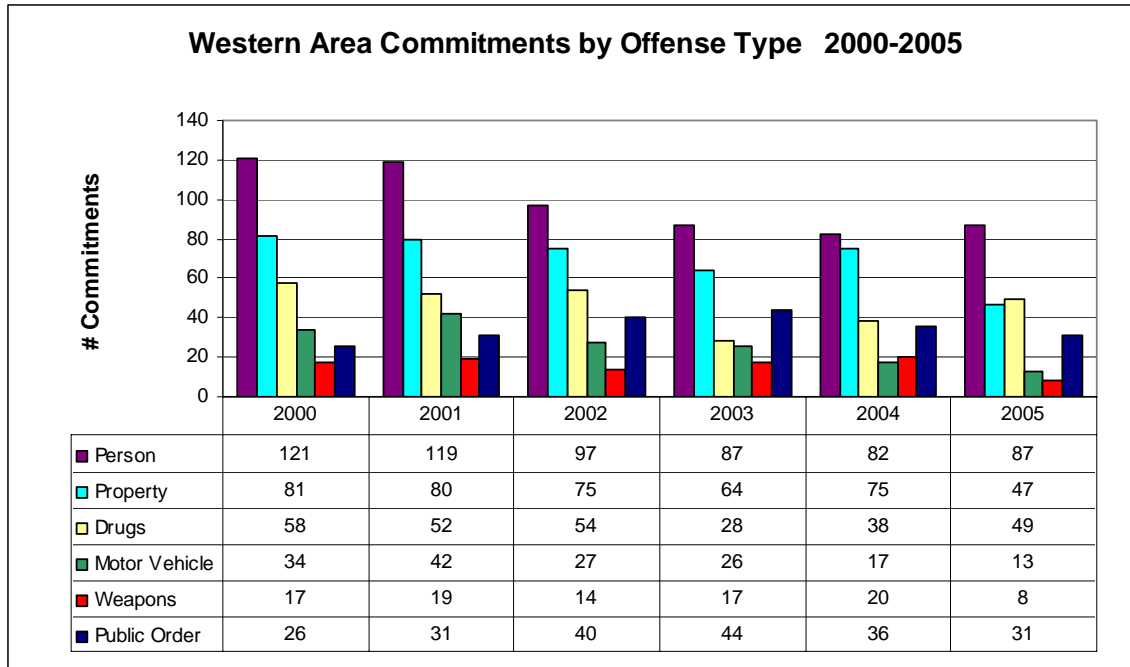


Western Area Commitments By Age 2000-2005



Western Area Commitments by Ethnicity 2000-2005





Western regional initiatives in 2005 included:

- The Youth Reentry Initiative:** The DYS Western Region implemented the Youth Reentry Initiative, a collaborative effort between the Springfield Police Department Youth Aid Bureau (YAB) and DYS. DYS youth from the City of Springfield, accompanied by their DYS caseworkers, are required to schedule an intake interview with YAB staff as part of their community reintegration plan. At that time, the youth and his caseworker meet with YAB staff to specifically discuss the youth's relapse plan and review the specific conditions of the client's Grant of Conditional Liberty. With this program, the police provide additional monitoring of DYS clients, and as a result, the initiative has proven to be an effective tool to enhance supervision of DYS clients in the community.
- Springfield Youth Leadership Program:** DYS youth participated fully and graduated from the Springfield Youth Leadership Program, a collaborative leadership development program between the City of Springfield and Springfield College. Each youth attended day sessions to learn computer and presentation skills. In addition to the day sessions, DYS youth attended an overnight camp that included team building and self esteem exercises. The culmination of the program included a presentation by the DYS youth to the sponsoring agencies, followed by feedback from the sponsors. As a final step in the process, the youth presented their projects to the Mayor of Springfield and other dignitaries. The presentation focused on how to engage 13-15 year old youth in after-school programming. The presentation included activities and strategies to attract youth to after-school programs along with concrete timelines and suggestions for implementation.

- **Study of Western Reentry Model:** The Western Region applied for and received approval for a team of graduate students from the UMass-Amherst School of Business to conduct a study to create measures to assess the efficacy of the Western Region Reentry model. The reentry model was developed over a 5-year period with federal funding from OJJDP. The study, conducted by UMass graduate students, included an extensive review of the literature focusing on reentry models, and interviews with a variety of DYS staff from all points of the DYS continuum of care. The final report indicated that the Western Region Reentry model is consistent with current literature and has value to the reentry process. It also highlighted the need for a process evaluation to determine the fidelity to the model before an outcome evaluation can be undertaken.
- **Boy Scout Troop:** A Boy Scout troop, the Pioneer Valley Council of the Boy Scouts of America, offered DYS youth a unique opportunity to gain positive values through participation in scouting, and the majority of the participants established good rapport with the troop's scoutmaster and responded very positively to the activities. This troop may be the first of its kind in the nation providing scouting activities to youth committed to a juvenile justice agency.

PROGRAM SERVICES

All DYS programs address the educational, psychological, and health needs of each client. Security and safety in locked secure and staff secure facilities are maintained by intensive staff supervision of clients; structured programming, including clinical interventions, education, structured recreation, and staff advocacy services. Following placement in secure facilities, offenders are placed in residential group homes, foster homes or at home with their family of origin with supportive services including supervision and support services through the Department's community reentry centers. The Department also operates several secure and staff-secure residential detention programs which provide care and custody while youth are awaiting trial.

Victim Services

The Victim Services Unit was established in October 2000 and its mission is to provide information, support, and notification to victims of juvenile crimes whose offenders are in the custody of the Department of Youth Services. This program enables DYS to fulfill the statutory mandates of the Victim Rights Law, M.G.L. c258B s.3 (t) and contributes to the agency's overall mission of public safety and continued partnerships with communities.

Upon request, victims receive advance verbal and written notification when a juvenile offender is transferred to a less secure facility, receives a temporary release (community pass), provisional release (release to the community) or final release (discharge from DYS custody). Notification is also provided as soon as possible when the juvenile receives an extension of commitment to DYS, is returned to a DYS placement for 60

days or more, is transferred to the state or county prison system, or has absconded from community supervision and his/her whereabouts are unknown.

Advocates in the unit also provide victims, parents of minor age victims, and family members of homicide victims with ongoing support and advocacy throughout the DYS commitment process. This includes, but is not limited to:

- helping victims file impact statements that describe the effects of the crime;
- working with DYS personnel to modify conditions of an offender's release on community supervision;
- helping victims develop personal safety plans when necessary; and
- providing direct assistance for accessing services for mental health counseling, victim assistance and/or compensation.

Since its inception in 2000, the Victim Services Unit has:

- managed almost 1000 "victim notification" cases;
- processed approximately 300 Certifications for Notice of an Offender's Release;
- provided more than 500 notifications to victims of juvenile crime in MA.; and
- provided outreach and education to an estimated 900 people, including DYS personnel, victims, members of the community, and other criminal justice and social service agency personnel.

In 2005, Victim Services Unit staff processed 35 new certifications (25 juvenile and 10 youthful offender) and provided 55 notifications to victims of juvenile crime in Massachusetts.

Female Services

During Fiscal Year '05, DYS was funded to implement a Female Services Initiative. Currently, there are several ongoing initiatives within the Department that were specifically funded by the Massachusetts Legislature to enhance services to the female population. DYS increased compensation for clinicians in programs for females to attract qualified professionals. The Department obtained psychiatric stabilization services for young women in crisis; and DYS established an independent living program for females transitioning back to the community from residential settings. Additionally, DYS hired a Director of Female Services to oversee statewide programming, develop gender-specific policies and procedures, and drive an agenda for improved services for young women in DYS care. Finally, in November, 2005, DYS and the Department of Capital Asset Management (DCAM) broke ground to construct a new 45-bed state of the art female-specific assessment and secure treatment facility in Westborough.

Three specific Boston-based initiatives focusing on services for girls at the local level include:

- **The Female Focus Initiative (FFI)** expanded from a gender-responsive intervention team including a DYS Caseworker, Roxbury Youthworks Community Monitor, Clinician and Coordinator to a stand-alone facility serving all Boston Metro Region female youth returning to the community. In 2005, the “Still We Rise” program opened in Dorchester as a community resource center for DYS girls.
- **The Girl’s Health Passport Project (see Health Services).**
- **Suffolk County Teen Prostitution Prevention Project:** DYS is an active participant in the **Suffolk County Teen Prostitution Prevention Project**, a multi-disciplinary team consisting of an Assistant District Attorney, the police, DSS, victim-witness advocates, youth legal advocates, probation, medical providers, community organizations and various mental health and substance abuse consultants. The project uses a multi-disciplinary approach to child sexual exploitation. It will develop intervention guidelines, utilize interagency communication, focus offender accountability on adult perpetrators, and provide services to adolescent female victims.

Educational Services

DYS operates a system-wide delivery of educational services for youth who are residing within DYS facilities. These services are designed to prepare youth to reintegrate into the community and to make a successful transition to school, job training or employment.

The Department continues to improve the delivery of educational services to youth in custody. In October, 2002, DYS awarded its statewide education contract to the Commonwealth Corporation's Center for Youth Development and Education (CYDE). With their leadership as the Lead Entity for Education (LEED), and the support and assistance of the Department of Education along with the Hampshire Education Collaborative, which holds the direct service subcontract for educational services, youth in our care and custody have shown remarkable improvement. This is a unique public/private collaboration which has provided the agency with the capacity to drive the development of a first rate core educational system.

Early accomplishments included:

- Agency-wide educational assessment/student planning process;
- A system-wide curriculum;
- Teacher evaluations;
- Student performance evaluations; and a
- Teacher recruitment, retention, and development strategy.

More specifically, among the most notable achievements in 2005 were:

- **Classroom Technology/Internet Access:** During 2005, the Department of Youth Services received federal E-rate discounts for the purpose of providing internet access to youth in 56 education programs operated by or under contract with DYS. The installation of computers was completed for nearly 80% of these education programs allowing internet access to more than 1,000 students and teachers.
- **MCAS (Massachusetts Comprehensive Assessment System):** The number of DYS youth in residential placements that took the Grade 10 MCAS tests for the first time in spring 2005 continued to rise. The percentage of youth who passed the Grade 10 English Language Arts (ELA) test increased to 51% in 2005 from 47% in 2004. The percentage of youth who passed the Grade 10 Mathematics test increased to 38% in 2005 from 28% in 2004.
- **Post-Secondary Transition** – An Interdepartmental Service Agreement (ISA) with Bunker Hill Community College (BHCC) resulted in enhanced educational opportunities for youth who earned a high school diploma or GED. These post-secondary educational opportunities were made available through the distance learning program at BHCC. DYS youth enrolled in college courses in English, mathematics, writing, sociology, and introduction to business while residing in residential programs.

Clinical Services

Within the first 30-45 days after commitment to DYS, youth receive a comprehensive assessment that is based on family involvement, prior delinquency, educational history, presence or absence of substance abuse, medical and psychiatric histories, and a review of factors related to risk of reoffending. Following the assessment phase, an individual treatment and service plan is developed and the youth is placed in a residential or community-based setting.

The clinical focus in the secure treatment residential programs is to rehabilitate the youth by preparing him or her to rejoin their community through the teaching of pro-social attitudes and behaviors using a cognitive-behavioral approach. In addition to secure treatment facilities, the Department has several community residential programs, all of which provide clinical and educational services that emphasize accountability and pro-social skill development. When the youth returns to the community, clinical services are provided through the Department's community reentry and neighborhood centers. Services provided vary across sites, but most offer counseling in the following areas: anger management, substance abuse, Dialectical Behavioral Therapy (DBT), pro-social skill groups, teen dating violence prevention, and parenting skills.

During the last two years, DYS has been working to address the growing number of detained and committed youths with serious mental health issues. Starting in Fiscal Year '05 and continuing in Fiscal Year '06, DYS implemented the Safety First Initiative, which allowed the agency to establish a critical network of clinical resources. The Department enhanced the clinical programming and increased the salaries of staff providing mental health services in order to attract and retain qualified licensed professionals. Licensed clinicians were hired and trained as intake and assessment clinicians in our pre-trial detention programs. We also added psychiatric services to our medical contracts. We developed rigorous training programs for suicide prevention and medication administration, and finally, we hired additional management personnel and direct care staff to better supervise clients in crisis.

In summary, in 2005, DYS dedicated specific resources to enhance clinical services including:

- Hired licensed clinicians in all residential programs;
- Integrated psychiatric coverage into 4 regionally-based medical contracts;
- Hired additional licensed clinicians to perform assessments in pre-trial detention programs;
- Developed better protocols for medication administration;
- Engaged consulting services of a national expert in suicide prevention in juvenile facilities;
- Initiated med chart reviews to establish baseline quality of care measures; and
- Expanded hours of med/psych coverage to include evenings and weekends, particularly for detention and female populations.

Health Services

The Department provides health services to all clients who are in out-of-home placements. Health care professionals are available on site in all secure treatment and staff secure facilities, and in 766-approved residential schools. Clients in small community-based residential programs and foster care are taken to local health care providers for their health care needs. Clients in detention are provided routine health care.

The focus of health care services for clients in pre-trial detention is urgent and emergent care. The goal is to alleviate any painful condition, prevent deterioration of any existing condition and prevent the spread of disease to other clients or staff. All clients receive an evaluation by a health-trained individual at admission and an assessment by a licensed provider within 24 hours of admission to determine if the resident has any current health problems (acute or chronic) or is currently being treated with medication which needs to be continued while in custody. All detained clients are offered screening for sexually transmitted diseases.

Health care goals for adjudicated clients include a complete medical history and physical exam by a physician, nurse practitioner or physician assistant unless already completed during detention. This is repeated annually as long as the client is in an out-of-home placement. Immunization status is reviewed and immunizations are updated as required. The Department provides all immunizations recommended for adolescents by the Massachusetts Department of Public Health. Clients are also screened for tuberculosis, STDs, and for other diseases indicated by their history. A dental examination and treatment are also scheduled as soon as possible after commitment.

All DYS clients have access to sick call at least three (3) days per week and receive HIV/STD Risk Reduction education. They are also offered HIV counseling and testing.

Health services are provided to the secure programs through contracts with hospitals or health care agencies in each of the DYS regions. In 2005, there were four contracts in place for the provision of health services in the regions:

- Metro Region – Carney Hospital;
- Central Region – University of Massachusetts Medical Center;
- Southeast Region – Healthcare of Southeastern Massachusetts; and
- Western Region – Baystate Medical Center.

These contracts provide primary care delivered on-site by health staff during daytime hours, Monday through Friday, and Saturday mornings.

In the community, **The Girl's Health Passport Project (GHPP)**, originally developed by the Juvenile Rights Advocacy Project (JRAP) at Boston College Law School in 2004 under the direction of Professor Fran Sherman, in cooperation with DYS, included more girls within its service umbrella in 2005. Supported by the Jessie B. Cox Trust, the Girl's

Health Passport Project focuses on connecting DYS girls in the community to local health care providers through the use of a nurse placed at a community reentry center. GHPP has implemented an innovative nurse practitioner health services delivery model for over 30 young women in the Boston area.

A new initiative, the Massachusetts Health Passport Project (MHPP) began in November 2005 with a six-month planning grant awarded to an evaluation team at the Eliot-Pearson Department of Child Development and the Department of Urban and Environmental Policy and Planning at Tufts University. The team collected and analyzed data from several sources on the health care needs and preferences of girls in Boston (GHPP), and in two potential expansion sites – Worcester and Brockton. The Tufts evaluation team also conducted a needs assessment, similar to the one conducted for girls, focused on the MHPP expansion to boys.

Substance Abuse Services

DYS recognizes substance abuse as a leading risk factor to re-offending behavior. Marijuana and alcohol are overwhelmingly the drugs of choice for DYS youth. All committed youth are screened for substance abuse disorders by using the Substance Abuse Subtle Screening Inventory (SASSI) or the Adolescent Diagnostic Interview (ADI). In addition, DYS conducts random drug testing on all committed youth in the community. Testing is done as part of the overall treatment process and a graduated sanctions policy is in place for youth who test positive.

Treatment Services

In 2005, DYS allocated 25% of its substance abuse expenditures to prevention and 75% to treatment. The substance abuse treatment services provided at DYS included:

- Juvenile Recovery Academy (JRA) operated by Spectrum Healthcare Systems, Inc., a 90-120 day program with a primary goal of reducing the risk of relapse for alcohol and other drugs. This DYS program with 16 boys' beds, located in Methuen, MA. serves committed youth in the DYS Central region. [Program moved to Northeast Region in 2006.]
- Brighton Treatment Center (BTC) operated by Community Solutions, Inc. The BTC is a 90-120 day program for boys committed to DYS. It is located in Brighton, MA. and has twenty five (25) beds, 10 of which are set aside for clients identified as having substance abuse disorders (SUDS). [Program closed in 2006.]
- Substance Abuse Treatment Services (SATS) from Spectrum Health Care Systems, Inc. This contract provides for four substance abuse clinicians, one for each DYS region to provide services at long-term locked programs and Community Reentry Centers (CRCs). This arrangement is intended to allow clinicians to establish therapeutic alliances with clients in DYS long-term treatment programs and then to work more closely with them once they re-enter

their home communities. When youth are identified as having a significant substance abuse problem and released to the community, a specific substance abuse plan is developed.

Substance abuse services are under-resourced at all stages of a youth's movement through the DYS system from detention through assessment through residential treatment and community supervision. [Critical gaps will begin to be addressed through a contract with a new substance abuse services vendor, the Institute for Health and Recovery in 2006/2007.]

ADMINISTRATION AND FINANCE

Fiscal Highlights

In 2005, the DYS budget was \$129,881,094 which funded the following four broad categories:

DYS Budget – 2005

| | |
|-----------------------|----------------------|
| Administration | \$4,526,404 |
| Community | \$20,141,916 |
| Detention | \$18,907,464 |
| Residential | \$86,305,310 |
| Total | \$129,881,094 |

DYS experienced significant operational changes during FY'05 as it implemented the Safety First Initiative (See Special Initiatives). Responding to the deaths of two DYS youth in December, 2003 and February, 2004, several state agencies dealing with youth undertook a study of safety issues in residential programs, including DYS facilities. Consequently, DYS sought supplemental funding in FY'05 to enhance safety measures in residential programs. The Safety First Initiative was implemented during the third and fourth quarter of FY'05 with \$2.5 million in supplemental funding and \$1.8 million in interagency service agreements between Department of Youth Services (DYS), Department of Mental Health (DMH) and Department of Public Health (DPH). The supplemental funds were used to enhance clinical services, facilities and staff, information management, and diversion. The improvement in services resulting from the Safety First Initiative annualized to a total of \$9.3.million in the Department's FY'06 budget.

In FY'05, the Department's budget included \$2.1 million to implement the Female Services Initiative (See Special Initiatives). In FY'06 the Department received an additional \$.4 million to annualize the improvements in services resulting from the Female Services Initiative, for a total of \$2.5 million. This allowed the agency to access residential stabilization services for DYS female clients, hire and retain licensed clinicians in programs for female clients, establish an independent living program for

young women, and hire a Director of Female Services to oversee all areas of operation in the continuum of care for female clients.

Finally, the Department received funding to increase the number of funded FTEs in FY'06 over FY'05 from 895.48 to 929.9. This modest growth allowed the agency to restore some of the critical oversight functions lost during the budget cuts of the 1990's. Those areas include:

- Clinical, medical and substance abuse services;
- Educational and vocational services;
- Residential and community-based programming;
- Client information and data management; and
- Policy and procedure development and project management.

This restoration of FTEs was critical to the safe and efficient operation of the agency and its programs and returned the staffing levels of the agency to its levels in FY'01.

INFORMATION TECHNOLOGY

The DYS Systems Unit is responsible for the deployment and support of computing technologies, network infrastructure, and related communications technology for DYS. In 2005, the Unit consisted of seven full-time DYS employees, four consultants and three vendor teams who supported:

- 800 administrative users;
- 300 educational computers
- 2 distinct wide area internet networks (WAN): one for administrative functions and a separate network for client educational needs;
- Statewide phone support; and
- 2 computer application projects.

The Systems Unit staff is responsible for the following applications and services:

- The Massachusetts Management Accounting and Reporting System (MMARS);
- The Human Resources Control and Management System (HRCMS);
- Massmail, the DYS e-mail system;
- The Youth Services Information System (YSIS), the current client tracking/case management application;
- E-Rate, a federally subsidized network that provides internet access for classroom use;
- Phone services and localized cabling installations; and
- Virtual Private Network (VPN) services.

In the near future, the Systems Unit will be:

- Deploying five new access-based computer applications and tablet technology;
- Expanding the Blackberry user base;
- Deploying a wireless bridge at the DYS Brewster site;
- Replacing and upgrading the DYS administrative computers;

- Refreshing the DYS education computing resources;
- Joining the Executive Office of Human Services (EOHHS) common infrastructure; and
- Working with a chosen vendor on a new case management application; the intent is to replace YSIS, the current DYS client tracking application with a newer integrated web-based case management application which collects data at the source and as clients progress through DYS.

TRAINING OPPORTUNITIES

The Department of Youth Services Training Department was involved in a variety of training efforts in 2005. DYS training is based on the belief that in order to have a safe, secure, and effective environment for children, you must have professional staff, working together as a team, who see each youth as an individual, and provide positive programming. To this end, each new DYS employee participates in three weeks of basic training: two weeks of classroom instruction and one week of on-the-job training. The Training Academy also works in partnership with the Department's Human Resources division. All direct care staff are required to attend annual re-certification training in both CPR and Crisis Prevention. Three-hundred seventy-four (374) individuals received basic training in 2005. This curriculum, developed by the DYS training staff was made available to other states in 2005 through the National Institute of Corrections (NIC) Information Center.

November is Suicide Awareness month for DYS and all staff attends training focused on this issue, conducted by regional clinical coordinators and program managers, and supported by the Training Unit. In 2005, the training consisted of a thorough review of the revised policies the Department developed to continue to keep this vulnerable population safe.

The DYS Training Department also expanded its collaborative efforts with other agencies of the Commonwealth. In 2005, staff conducted trainings for the MA. Department of Corrections and other public safety agencies. Training courses included:

- An overview of the Department of Youth Services;
- Working with juvenile offenders in overnight arrest units;
- Working with female offenders; and
- Conducting investigations.

Finally, the Training Unit monitors the needs of the field and provides a variety of professional development courses each year. These course offerings range from supervisor training to trainings on specific topics in response to requests, e.g., domestic violence training. The National Institute of Corrections (NIC) is a valuable resource to the Training Department for new curricula to offer DYS employees.

LEGAL

The Office of the General Counsel (OGC) provides legal representation to DYS. In 2005, the OGC was staffed by a Deputy General Counsel, two part-time Assistant General Counsels and a paralegal/administrative assistant.

The OGC:

- Has direct responsibility for conducting litigation in all of the “extension of commitment” cases and cases filed with the Massachusetts Commission Against Discrimination (MCAD);
- Coordinates with the Office of the Attorney General (OAG) representation by the OAG of the Department and its employees in any tort, civil rights, labor or other court cases filed against DYS;
- Reviews, revises, and distributes all Departmental policies;
- Provides the “Legal” portion of DYS basic training as well as training in other areas, including such topics as revocation and sexual harassment;
- Provides the legal analysis for CORI checks;
- Serves as the designee for the Commissioner regarding revocation and classification appeals; and
- Answers legal questions from the field and provides legal advice as needed.

The Extension Caseload

Whenever the Department is “of the opinion that discharge of a person from its control” would be “physically dangerous to the public,” it shall make an order directing that the person stay in DYS custody. That order gets reviewed by the juvenile court using a “beyond reasonable doubt” standard. If the court agrees that discharge would be physically dangerous to the public, it confirms the DYS order. The Department usually seeks an extension of commitment for juveniles who are sex offenders who have been resistant to participating in their treatment plans, and juveniles who continue to be unusually assaultive even while in DYS custody. The extension caseload is managed by the two Assistant General Counsels and averages about 30 cases per year.

The Tort Caseload

The litigation of tort cases is handled by the Office of the Attorney General. The Department’s legal staff is involved in discovery issues related to those cases. Presentment letters get sent to the General Counsel at EOHHS who asks us to investigate and make a recommendation as to settlement within six months. The Department typically receives presentment letters on a dozen cases a year, most of them resulting from car accidents occurring during transports. The Department occasionally gets a case involving an individual injured by the behavior of a DYS client; cases where a client or staff member is seriously injured, as a result of an assault; or injuries resulting from “slip and fall” accidents. In 2005, the Department handled eight (8) tort cases.

The MCAD Caseload

The MCAD caseload is handled directed by DYS attorneys. DYS typically handles a dozen MCAD cases per year. Most of these cases allege sexual harassment by other staff, but a few cases claim discrimination based on age, race or disability. In 2005, DYS had seven (7) pending MCAD cases.

Policy Development

The Deputy General Counsel chairs a twelve-member Policy Committee, formed in 2002 which meets twice a month. The Policy Committee's goal is to update all of the DYS policies, including conversion to a more user friendly format. In 2005, there were two sets of policies signed by the Commissioner: the first was a set of three policies related to suicide assessment and prevention and the second set of policies dealt with contraband and personal searches.

The Investigations Unit

The Investigations Unit reports to the OGC and all of the investigative reports are reviewed by the OGC before being finalized. Investigations are initiated through the "Serious Incident" reporting process whereby incidents that are defined through policy as being "serious" are reported through the Communications Information Center (CIC) and logged in a central database. The total number of serious incident reports in 2005 was 1522 including 724 restraint reports. They are reviewed by the Chief Investigator and an investigation is initiated when a restraint results in injury, or where a problematic pattern in a unit or program has been detected. Most incident reports are closed out because the report itself indicates that the staff response to the incident was appropriate, or further follow-up is not required. In 2005, there were six "full investigations" conducted by the Assistant General Counsels in the OGC. These were sexual harassment investigations or cases of a particularly sensitive nature.

SPECIAL INITIATIVES IN 2005

The Safety First Initiative: In an effort to address the growing number of detained and committed youths with serious mental health issues, DYS implemented the Safety First Initiative, which allowed the agency to establish a critical network of clinical resources for DYS clients.

The Safety First Initiative funded clinical enhancements in all DYS secure programs including licensed clinical directors and staff clinicians. An enhanced intake process, including intake assessments in pre-trial detention programs, was implemented. In addition, psychiatric coverage was integrated into existing medical contracts. Moreover, staff were trained in administering medication and offered modest stipends for the additional responsibilities; monies were also provided for overtime and training time related to this initiative. Area on-call teams comprised of 3-person teams were added to cover suicide watches, hospital runs, and 4-minute bed checks. Gaps in program

administration were closed by adding management personnel such as program directors, assistant directors and clinical directors in programs where these positions had been shared by two programs. Finally, as a result of the Safety First Initiative, there was enhanced oversight and management in the areas of clinical services, medical services, policy and procedures, and information technology to ensure effective operations.

The Female Services Initiative: In 2005, a variety of DYS initiatives were specifically funded by the Massachusetts Legislature to enhance services to the female population. The Female Services Initiative funded residential stabilization services for DYS female clients with serious mental health needs; an independent living program for young women who successfully graduate from DYS residential programs, but lack appropriate settings in the community to which they can return; and enhanced clinical services in female programs including licensed clinical directors and clinicians. Finally, as part of the Female Services Initiative, DYS hired a Female Services Coordinator to oversee all areas of operations in the continuum of care for female clients.

Detention Reform Initiative

DYS was awarded Office of Juvenile Justice and Delinquency Prevention (OJJDP) Formula Grant funding through the Executive Office of Public Safety in 2005 to begin a three-year, multi-phase planning and implementation process to reduce overuse of detention in the Massachusetts juvenile justice system and develop a continuum of detention alternatives. During the first two years, stakeholders will engage in system mapping, consensus building, and planning for policy and practice changes. The implementation of the intervention plan occurs in year Three. DYS is basing its detention reform on the successful Juvenile Detention Alternatives Initiative (JDAI) model developed, implemented, evaluated, and replicated by the Annie E. Casey Foundation.

Performance-based Standards (PbS)

PbS is an acronym for Performance-based Standards for Youth Correction and Detention Facilities program, a major federal initiative initiated across the country in 1995 to improve the safety and conditions of confinement in juvenile facilities. The PbS program provides a set of goals and standards that individual facilities and agencies should try to attain and, tools to help facilities to achieve these standards through regular self-assessment. Assessment, detention, and correctional facilities that are part of the PbS program collect certain data from records, reports, and client interviews twice per year and enter the data online through the PbS web site. The data are checked by PbS staff and the results are reported back to facilities in the form of a PbS site report showing the facility's performance.¹ In 2005, there were 8 DYS facilities participating in the PbS program and the plan is to launch PbS in eight additional DYS facilities in 2006/2007.

¹ PbS learning Institute Inc.

Boston Juvenile Reentry Initiative (BJRI)

In 2002, DYS, in partnership with the Boston Police Department, was awarded a 3-year, \$1 million grant from the U.S. Department of Justice to design a model reentry program for serious and violent offenders who pose a significantly higher risk of continued violence and serious crime after release from secure juvenile correctional facilities. The initiative focuses on high-risk juveniles ages 14-21 who are under the jurisdiction of DYS and who are returning to the community after a period of confinement. The target area covers the Roxbury, Dorchester, Mattapan and South End areas of the City of Boston in the DYS Metro Region. Program operations of the Boston Juvenile Reentry Initiative (BJRI) began in early 2003. All youth involved in the BJRI receive supervision and support services through a local community reentry center. All clients are assigned a reentry caseworker who works with each youth through their residential confinement and continues through a required period of community supervision. Caseworkers, mentors and residential program staff work collaboratively to identify community resources for education, vocational services, employment (if eligible), mental health and substance abuse services, housing when needed, recreational activities and other support services. Caseworkers also intervene with families of project participants to prepare them for the juvenile offender's release. As of April, 2006, only 22 BJRI juveniles (27%) out of the total 82 BJRI juveniles released into the community had been rearrested and convicted within a year of their release from custody.

DYS Central Office and Regional Offices

2007

DYS Central Office

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(617) 727-7575

Central Regional Office

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Westboro, MA 01581
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Metropolitan Regional Office

Department of Youth Services
425 Harvard Street
Dorchester, MA 02124
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Northeast Regional Office

Department of Youth Services
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Southeast Regional Office

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Murray Building - 60 Hodges Avenue
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